

MENTALLY ILL OFFENDER CRIME REDUCTION GRANT (MIOCRG) PROGRAM

Program Evaluation Survey

This survey will become part of your county's MIOCRG contract with the Board of Corrections.

1. Key Research Contacts:

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2. Program Name:

Grant recipients have found it useful to pick a name that helps them to create a Program identity. Two examples are the IMPACT (Immediate Mental Health Processing, Assessment, Coordination and Treatment) project and the Connections Program. Indicate the name you will use to refer to your program.

Response: **PASSAGES**

3. Research Design:

a. Check (✓) the statement below that best describes your research design. If you find that you need to check more than one statement (e.g., true experimental and quasi-experimental), you are using more than one research design and you will need to complete a separate copy of the survey for each design. Also, check the statements that describe the comparisons you will make as part of your research design.

Research Design (Check One)	
<input type="checkbox"/>	True experimental with random assignment to enhanced treatment and treatment-as-usual groups
<input checked="" type="checkbox"/>	Quasi-experimental with matched contemporaneous enhanced treatment and treatment-as-usual groups
<input type="checkbox"/>	Quasi-experimental with matched historical group
<input type="checkbox"/>	Quasi-experimental interrupted time series design
<input type="checkbox"/>	Quasi-experimental regression-discontinuity design
<input type="checkbox"/>	Quasi-experimental cohort design
<input type="checkbox"/>	Other (Specify)
Comparisons (Check all that apply)	
<input checked="" type="checkbox"/>	Post-Program, single comparison between enhanced treatment and treatment-as-usual groups
<input type="checkbox"/>	Post-Program, repeated comparisons (e.g., 6 and 12 months after program separation) between and within enhanced treatment and treatment-as-usual groups
<input type="checkbox"/>	Pre-Post assessment with single post-program comparison between enhanced treatment and treatment-as-usual groups
<input type="checkbox"/>	Pre-Post assessment with repeated post-program comparisons (e.g., 6 and 12 months after program separation) between and within enhanced treatment and treatment-as-usual groups
<input type="checkbox"/>	Pre-Post assessment with repeated pre and post program comparisons between and within enhanced treatment and treatment-as-usual groups
<input type="checkbox"/>	Other (Specify)

- b. If you are using a historical comparison group, describe how you will control for period and cohort effects.

Response: N/A

4. Target Population:

Please identify the population to which you plan to generalize the results of your research. Describe the criteria individuals must meet to participate in the enhanced treatment and treatment-as-usual groups (e.g., diagnosis, criminal history, residency, etc.). Also, please describe any standardized instruments or procedures that will be used to determine eligibility for program participation and the eligibility criteria associated with each instrument.

Response: **The intervention population will be individuals with a primary mental illness and a substance abuse dependency. The criteria for admission to the enhanced treatment group will be the same as the current criteria for the existing San Bernardino County Mental Health Court. These include:**

- **Be age eighteen (18) years old or older**
- **Have a severe and/or persistent mental illness**
- **Be treatment complaint while incarcerated**
- **Voluntarily agree to participation in the program**
- **Agree to follow program regulations**
- **Sign an Individualized Treatment Contract defining mental health service to be provided**
- **Agree to a length of sentence, probation and follow up program participation of at least twelve months to ensure treatment continuity, stability, and program effectiveness**
- **Have a minimal history of violence - offences which are sexual or excessively violent in nature will not be considered**
- **Sign a Term and Conditions Contract in open court to maintain community outpatient status.**

The above eligibility will be determined based upon the Jail Mental Health Clinical Assessment

5. Enhanced Treatment Group:

- a. Indicate the process by which research subjects will be selected into the pool **from which** participants in the enhanced treatment group will be chosen. For example, this process might include referrals by a judge or district attorney, or selection based on the administration of a mental health assessment instrument.

Response: **Individuals will be referred to the program by the Court, Public Defender and District Attorney offices and the Department of Behavioral Health. Once the Public Defender and District Attorney approve, an initial mental health evaluation will determine eligibility. Approved eligible inmates will be court-ordered to the in-custody Passages treatment program with follow-up probation and mental health supervision by one of the four regional teams.**

- b. Indicate exactly how the enhanced treatment group will be formed. For example, it may result from randomized selection from the pool described in 5a above. Or, if the group size is small, a matching process may be required to achieve equivalence between the enhanced treatment and treatment-as-usual groups. In the case of a quasi-experimental design, the group may be a naturally occurring group. Please describe the origins of this group in detail, including an identification and description of matching variables, if used. If a quasi-experiment is planned, please describe the origins and nature of naturally occurring enhanced treatment groups.

Response: **See above for selection process for the enhanced treatment group. Matching involves selection for characteristics of experimentals (enhanced treatment group) with 200 SPAN experimental subjects who are dually diagnosed, based on the age range, criminal charges, diagnosis, and**

proportion in ethnic groups (pool of 1,200 inmates). Listwise matching will be on diagnostic categories and the above characteristics.

6. Treatment-as-Usual (Comparison) Group:

- a. Indicate the process by which research subjects will be selected into the pool **from which** participants in the treatment-as-usual group will be chosen.

Response: **These subjects are individuals who are dual-diagnosed and have been randomly assigned to the SPAN control group.**

- b. Indicate exactly how the treatment-as-usual group will be formed. For example, if a true experiment is planned, the treatment-as-usual group may result from randomized selection from the subject pool described in 5a above. Or, if the group size is small, a matching process may be required in an attempt to achieve treatment-control group equivalence. If a quasi-experimental design is planned, the group may be a naturally occurring group. Please describe the treatment-as-usual group in detail, including an identification and description of matching variables, if used. If a quasi-experiment is planned, please describe the origins and nature of naturally occurring comparison groups.

Response: **As noted above, SPAN control subjects will make up the pool to be compared with the enhanced treatment subjects. As unique enhanced treatment subject characteristics are identified they will be used in a listwise matching procedure to select a comparable group of 200 comparison subjects. Matching variables include age, ethnic groups, diagnosis and criminal charges.**

7. Historical Comparison Group Designs (only):

If you are using a historical group design in which an historical group is compared to a contemporary group, please describe how you plan to achieve comparability between the two groups.

Response: **N/A**

8. Sample Size:

This refers to the number of individuals who will constitute the enhanced treatment and treatment-as-usual samples. Of course, in any applied research program, subjects drop out for various reasons (e.g., moving out of the county, failure to complete the program). In addition, there may be offenders who participate in the program yet not be part of the research sample (e.g., they may not meet one or more of the criteria for participation in the research or they may enter into the program too late for you to conduct the follow-up research you may be including as part of the evaluation component). Using the table below, indicate the number of individuals that you anticipate will complete the enhanced treatment or treatment-as-usual interventions. This also will be the number of individuals that you will be including in your statistical hypothesis testing to evaluate the program outcomes. Provide a breakdown of the sample sizes for each of the three program years, as well as the total program. Under Unit of Analysis, check the box that best describes the unit of analysis you will be using in your design.

Sample Sizes (Write the expected number in each group)		
Program Year	Treatment Group	Comparison Group
First Year	60	60
Second Year	70	70
Third Year	70	70
Total	200	200

Unit of Analysis (Check one)	
<input checked="checked" type="checkbox"/>	Individual Offender
<input type="checkbox"/>	Geographic Area
<input type="checkbox"/>	Other:

9. Enhanced Treatment Group Interventions:

Describe the interventions that will be administered to the enhanced treatment group. Please indicate of what the interventions will consist, who will administer them, how they will be administered, and how their administration will be both measured and monitored.

Response: The model was based on a year-long Pre-Release Planning Study and programs now in place at Glen Helen Rehabilitation Center. Stabilization is critical to this population. Interventions involve intensive on-site treatment including multi-disciplinary medical, psychosocial, case management and recovery services. A modification of the Therapeutic Community Model, services to be provided include groups and individual therapy, substance abuse treatment and education, occupational therapy, health management and psychiatric treatment. A unique component of the treatment model is the inclusion of Pet Therapy. Additionally, clients will have the opportunity to participate in jail based vocational programs such as landscaping and commercial bakery. These in-custody treatment interventions will be administered by a treatment team staffed by the Department of Behavioral Health. Administration will be measured and monitored through review of mental health and jail custody records.

Individualized, integrated community based treatment services in the community will be provided for an average of 280 days after release. These treatment teams will be a collaborative team comprised of mental health, medical and substance abuse professionals providing comprehensive treatment, medication management, drug testing, case management and support services to facilitate maintenance of their on-going recovery and rehabilitation. These services include transportation to clients medical appointments, group meetings, job trainings and other necessary community support activities. A probation officer will be part of each regional team. The clinical component of each regional team will be contracted to Community Based Organization. Their administration will be monitored and measured by the Program Manager who oversees the overall program through the Department of Behavioral Health.

10. Treatment-as-Usual Group Interventions:

Describe the interventions that will be administered to the treatment-as-usual group. Please indicate of what the interventions will consist, who will administer them, how they will be administered, and how their administration will be both measured and monitored.

Response: No interventions other than those normally provided by Jail Mental Health Services staff are planned for the SPAN matched controls. JMHS provides clinical assessment, crisis intervention, medications, brief therapy, and community resource information. Administration will be measured and monitored through review of mental health records and Department of Behavioral Health computer data.

11. Treatments and Outcomes (Effects):

Please identify and describe the outcomes (treatment effects) you hypothesize in your research. Indicate in the table below your hypothesized treatment effects (i.e., your dependent variables), their operationalization, and their measurement. Also indicate the treatment effect's hypothesized cause (i.e., treatments/independent variables) and the hypothesized direction of the relationship between independent and dependent variables.

Independent Variables (treatment)	Dependent Variables (hypothesized outcomes)	Operationalization of Dependent Variables	Method of Measuring Dependent Variable	Hypothesized Relationship Between Ind & Dep Variables (+ or -)
Increased mental health services: counseling in facility; improved use of medications	reductions in arrests and jail bookings pre to post; decreased jail bed days; reduced system costs	records	number of arrests (ratio); number of bookings (ratio); costs	-
Continuous intensive case management; occupational therapy	improved in-facility and community functioning	questionnaire	pre and post interviews by MH staff	+
Social work and probation followup in the community; transitional housing; appropriate referrals	improved community functioning	questionnaire	pre and post interviews by MH staff	+

12. Statistical Analyses:

Based on the table in #11 above, formulate your hypotheses and determine the statistical test(s) you will use to test each hypothesis. Enter these into the following table.

Statements of Hypotheses	Statistical Test(s)
1. Program implementation will reduce arrests post program	t-test
2. Program implementation will reduce returns to jail post program	t-test
3. Intensive counseling and occupational therapy in and outside the facility and improved use of medications will improve community functioning	chi-square, lambda
4. Improved followup by social workers and probation officers will reduce arrests and returns to jail, and improve community functioning	chi-square; t-tests, as appropriate
5. Implementation of the program will reduce justice system costs	t-test
6.	
7.	
8.	
9.	
10.	

13. Cost/Benefit Analysis:

Please indicate whether you will be conducting a Program cost/benefit analysis of the program (optional).

Cost/Benefit Analysis	
<input checked="checked" type="checkbox"/> Yes	<input type="checkbox"/> No

If you will conduct a cost/benefit analysis, describe what it will focus on and how it will be performed.

Response: The dependent variable of cost reductions includes an evaluation of the types of cases manifesting the most significant cost reductions. Elements will include detention and treatment costs (i.e., staff, medications) and criminal justice system costs (e.g., court costs). It is anticipated that program experimental clients (alternative treatment) will show significant reductions in arrests and subsequent re-incarceration episodes at reduced costs over traditional methods and as compared to the matched samples. This process of cost evaluation has begun in the SPAN project. As is being done for the SPAN program in San Bernardino County, local cost "factors" are being developed in the areas of jail bed costs, jail mental health costs, return to court costs, prison and mental health facility returns, board and care costs. These factors will be applied to data for enhanced, treatment as usual, and matched comparison groups. A key intervening variable of concern for costs, rearrests, and returns to jail will be time at risk in the community.

14. Process Evaluation:

How will the process evaluation be performed? That is, how will you determine that the program has been implemented as planned and expressed in your proposal? Please include a description of how will you will record and document deviations of implementation from the original proposal. Also, please identify who will conduct this evaluation and who will document the results of the evaluation.

Response: Based on process evaluations conducted in similar settings by the evaluators, detention and treatment staff will be surveyed at program outset and annually thereafter for the course of the grant. Data on program service delivery will also be compiled to meet the requirements stated (e.g., 75% of the treatment group will attend daily treatment groups.). Examination of records kept on services delivered to individuals, and interviews with staff and clients will be done as part of the process evaluation; these should provide additional information on what is successful with various individuals and subgroups. These procedures will allow evaluators to determine the degree to which services are provided, based on facility and treatment records; observed interaction with facility staff, and family contacts. Interviews with clients will be conducted by Behavioral Health staff, both pre- and post-program.

Project evaluators will code data from the Intake Assessment Form now used in the SPAN program as well as the "SPAN-IN return to custody interview form now used for re-admissions to the jail. Data on community activities will be collected from contract providers and through the Department of Behavior Health SIMON system, which logs "episodes" of treatment. Additional data on criminal activity of individuals ("rap sheets") will be solicited from the State Bureau of Criminal Information and Analysis.

15. Program Completion:

What criteria will be used to determine when research participants have received the full measure of their treatment? For instance, will the program run for a specified amount of time irrespective of the participants' improvement or lack thereof? If so, how long? Alternatively, will completion be determined when participants have achieved a particular outcome? If so, what will that outcome be and how will it be measured (e.g., decreased risk as measured by a "level of functioning" instrument)?

Response: Clients will be terminated when Behavior Health staff determine that they have met program goals and their own goals in treatment, and have successfully completed their term of probation.

16. Participant Losses:

For what reasons might participants be terminated from the program and be deemed to have failed to complete the program? Will you continue to track the outcome measures (i.e., dependent variables) of those who leave, drop out, fail, or are terminated from the program? For how long will you track these outcome measures?

Response: **Terminations as a result of failure will result upon rearrest and a sentence to prison or a term in jail. These individuals will continue to be tracked for the life of the project, although a prison or lengthy jail sentence may preclude extensive time at risk in the community.**